

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6) AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

	OMB AP	ROVAL						
OMB NUMBER: 3235-0								
	Expires:	April 30, 2008						
	Estimated average	burden						
ı	16.00							

SEC USE ONLY						
Prefix	Serial					
I						
Date R	eceived					
1	l '					

Name of Offering (☐ check if this is an Series A-1 and Series A-2 Preferred Stock a	amendment and name has changed, and indicate change.) nd Warrant Offering	1340195
Filing Under (Check box(es) that apply): Type of Filing: ■ New Filing □	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Amendment	Section 4(6) ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	e issuer	
Name of Issuer (Check if this is an am Sports Loyalty Systems, Inc.	endment and name has changed, and indicate change.)	
Address of Executive Offices 540 Commonwealth Avenue, Boston, MA 0	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) (617) 236-0440
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Design and operate loyalty based awards pro	SEP 29 2005 IHOMSOM	0 <u>5</u> 067363
Type of Business Organization ☑ corporation ☐ business trust	☐ limited partnership, already formed ☐ limited partnership, to be formed	other (please specify):
Actual or Estimated Date of Incorporation of Jurisdiction of Incorporation or Organizatio	or Organization: or Organization: or (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	Ma Actual ☐ Estimated

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such {W0389408.3} exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☑ Promoter	Beneficial Owner	■ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind Leslie B. Otten	ividual)		. al company of the c		
Business or Residence Address P.O. Box 547, Bethel, ME 0421	•	er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind Jeffrey D. Bussgang	ividual)				
Business or Residence Address c/o IDG Ventures, One Exeter		er and Street, City, State, Z. 02116	ip Code)	# 10 Than 2 1 2 1 1 1 1	
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind IDG Atlantic Ventures I, LP	ividual)				
Business or Residence Address One Exeter Place, Boston, MA		er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind LBO Enterprises, LLC	lividual)				
Business or Residence Address P.O. Box 547, Bethel, ME 0421	•	er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)	-			
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Cwner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		

				B. INF	ORMATIC	N ABOUT	OFFERI	NG				
1. Has the iss	uer sold, or	does the iss	uer intend to	o sell, to no	n accredited	investors ir	this offerin	g?				No Ma
	ئىم ئ	. ·'	Ans	swer also in	Appendix,	Column 2,	f filing und	er ULOE.				
2. What is the	e minimum	investment	that will be	accepted fro	om any indiv	vidual?	******************		,,		\$_N/A_	
				-	-					•	Yes 1	No
3. Does the o	ffering pern	nit joint own	ership of a	single unit?	•••••			•••••	*******			_
4. Enter the in remuneration of a broker or listed are asso Full Name (L	for solicitat dealer regis ciated perso	ion of purch stered with tons of such a	asers in con he SEC and broker or o	nection wit For with a s	h sales of se tate or states	curities in t , list the na	he offering. me of the br	If a person oker or deal	to be listed er. If more	is an associ than five (ated perso	
Business or R	esidence Ac	idress (Num	ber and Str	eet, City, St	ate, Zip Cod	le)						
Name of Asso	ciated Brok	ter or Deale	r									
States in Whie					licit Purchas	Sers						•
`		or check ind		,							All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND] ·	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business or R				eet, City, St	ate, Zip Coo	le:)						
States in Whi					licit Purcha					П	All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	 [GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	st, if individ	tual)									
Business or R	esidence A	idress (Nun	iber and Str	eet, City, St	ate, Zip Coo	ie)						
Name of Asso	ociated Brol	er or Deale	г									
States in Whi		isted Has So			licit Purcha	SCITS					All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	ועדו	[VT]	[VA]	[WA]	[WV]	ıwı	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

and already exchanged. Type of Security		Aggregate Offering Price	Amount Already Sold
		\$	
		\$3,000,000	\$1,500,000
Equity		\$ <u>3,000,000</u>	\$ <u>1,500,000</u>
	☐ Common ☑ Preferred		
Convertible Securities ((including warrants)	\$	\$
Partnership Interests		\$	\$
Other (Specify)	\$	\$
Total		\$	\$1,500,000
Α	answer also in Appendix, Column 3, if filing under ULOE.		
 Enter the number of accred- offering and the aggregate of the number of persons who 	ited and non-accredited investors who have purchased securities in this dollar amounts of their purchases. For offerings under Rule 504, indicate have purchased securities and the aggregate dollar amount of their purchases 'if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
Accredited Investors		- ,	\$
Non-accredited Investo	rs		\$
T-4-1 (f 51:	no des Parla 604 colo)		•
	under Rule 504 only)		\$
3. If this filing is for an offering sold by the issuer, to date, in	ng under Rule 504 or 505, enter the information requested for all securities n offerings of the types indicated, the twelve (12) months prior in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering		Type of Security	Dollar Amoun Sold
Rule 505			\$
Regulation A			\$
Rule 504			\$
Total			\$
securities in this offering. The information may be	ll expenses in connection with the issuance and distribution of the ng. Exclude amounts relating solely to organization expenses of the issuer. We given as subject to future contingencies. If the amount of an expenditure in estimate and check the box to the left of the estimate.		
Transfer Agent's Fees			S
Printing and Engraving	g Costs		S
Legal Fees			\$50,000
Accounting Fees			□ \$
Engineering Fees			S
Sales Commissions (sp	ecify finders' fees separately)		□ \$
Other Expenses (identi	fy)	***************************************	□ \$
			\$50,000

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND US	E OF PI	ROCEEDS		
1 and total expenses furnished in response to	offering price given in response to Part C - Question Part C - Question 4.a. This difference is the			!	\$ <u>2,950,000</u>
Indicate below the amount of the adjusted gros used for each of the purposes shown. If the am- estimate and check the box to the left of the esti- the adjusted gross proceeds to the issuer set for	ount for any purpose is not known, furnish an mate. The total of the payments listed must equal				
			Payments to Officers, Directors, & Affiliates	1	Payments To Others
Salaries and fees			s		\$
Purchase of real estate			\$		\$
Purchase, rental or leasing and installation	of machinery and equipment		\$		\$
•	and facilities		\$		
Acquisition of other businesses (including offering that may be used in exchange for t			\$		
1 0,			\$280,000		\$
• •					
0 1			\$		\$2,670,000
Other (specify):		_ 🛚	\$		\$
		-			
			\$		
Column Totals		⊠	\$280,000	Ø	\$2,670,000
Total Payments Listed (Column totals add	ed)		⊠ \$ <u>2</u> .	<u>950.</u>	000
	D. FEDERAL SIGNATURE				
signature constitutes an undertaking by the issu	by the undersigned duly authorized person. If this notice to furnish to the U.S. Securities and Exchange Commaccredited investor pursuant to paragraph (b)(2) of Rule	ission, u			
Issuer (Print or Type)	Signature		Date		
Sports Loyalty Systems, Inc.	Lich BOM		9/21/	10	5
Name of Signer (Print or Type)	Title of Signer (Print or Type)	, 		_	
Leslie B. Otten	President				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	
	0.262 presently subject to any of the disqualificat	
	See Appendix, Column 5, for state i	response.
2. The undersigned issuer hereby under Form D (17 CFR 239.500) at such	takes to furnish to any state administrator of any times as required by state law.	state in which this notice is filed a notice on
The undersigned issuer hereby under issuer to offerees.	takes to furnish to the state administrators, upon	written request, information furnished by the
limited Offering Exemption (ULOF	at the issuer is familiar with the conditions that m 3) of the state in which this notice is filed and undestablishing that these conditions have been satisfied.	erstands that the issuer claiming the availability
The issuer has read this notification and duly authorized person.	knows the contents to be true and has duly cause	d this notice to be signed on its behalf by the undersigned
Issuer (Print or Type)	Signature	Date
Sports Loyalty Systems, Inc.	Sush B O	9/21/05
Name of Signer (Print or Type)	Title of Signer (Print or Type)	

President

Leslie B. Otten

Instruction
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.